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Peabody Developmental Motor Scale Second Edition (PDMS-2)

Availability:	**Please visit this website for more information about the instrument**: Peabody Developmental Motor Scale Second Edition Link
Classification:	**Supplemental - Highly Recommended**: for measuring deterioration and short-term improvement in pediatric Mitochondrial Disease (Mito) **Supplemental**: Traumatic Brain Injury (TBI) **Exploratory**: Spinal Cord Injury (SCI)-Pediatric (ages 0–5 years)
Short Description of Instrument:	The PDMS-2 (Folio and Fewell 2000) is an early childhood motor development program that provides (in one package) both in-depth assessment and training of remediation of gross and fine motor skills. The assessment is composed of six subtests (Reflexes, Stationary, Locomotion, Object Manipulation, Grasping and Visual Motor Integration) that measure interrelated motor abilities that develop early in life. It is designed to assess the motor skills of children from birth through 5 years of age.
Scoring Information:	Scores include 1) a Gross Motor Quotient which is a composite of the Reflexes, Stationary, Locomotion and Object Manipulation subtests, 2) a Fine Motor Quotient, a composite of the Grasping and Visual-Motor Integration subtests, and 3) a Total Quotient, a combination of the gross and motor subtests. Scores are reported as standard scores, percentile ranks, and age equivalents.
Time to Administer:	45–60 minutes
Comments/Special instructions:	**Administration Skills:** MA (psychologist, OT, speech pathologist, social work, special ed) or BA Occupational therapies with certification. **Limitations:** Valid up to age 5 years. Has not yet been validated in mitochondrial disease.

Rationale/ Justification:	**Strengths/Weaknesses:** Relatively wide age range, reference values for normal children available, good psychometric properties. Developed for the follow-up and screening of healthy children, requires a lot of time. The PDMS-2 is limited to children of preschool age or five years old and younger. Sometimes, it can be used on children who are as old as eight years old, but this assessment tool cannot be used to diagnose motor skill dysfunctions in older children and adults. Assesses both qualitative and quantitative aspects of gross and fine motor development in young children; recommends specific interventions. **Psychometric Properties:** Interne consistency 0.85–0.98, balance in 3–4 year olds 0.71, test-retest reliability 0.82–0.96. Interrater reliability 0.96–0.99. Correlation with age 0.80–0.93, correlates with other scales for early development 0.73–0.91. 39% of the children with fine motor problems, did so according to PDMS-2. **Administration:** This assessment test is composed of six sub-tests that include special instructions on how each is administered to the preschool-age child. To keep the results of the test reliable and precise, the actual instructions on how the test will be carried out are only given to the test administrators and psychologists. This will prevent the parents from "preparing" their child to pass the test. The PDMS-2 can be used by occupational therapists, physical therapists, diagnosticians, early intervention specialists, adapted physical education teachers, psychologists, and others who are interested in examining the motor abilities of young children. **Age:** 0–5 years old. **Time:** 45–60 minutes

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